SUBMIT: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO:

**Bayfield County** Planning and Zoning Depart.

**PO Box 58** Washburn, WI 54891 (715) 373-6138

#### **APPLICATION FOR PERMIT BAYFIELD COUNTY, WISCONSIN**



Width:

Width:

INSTRUCTIONS: No permits will be issued until all fees are paid. Checks are made payable to: Bayfield County Zoning Department.

DO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICANT

TYPE OF PERMIT REQUESTED   LAND USE   SANITARY   PRIVY   CONDITIONAL USE   City/State/Zip:   Mathy Construction Company   Mailing Address:   City/State/Zip:   US 590 PTIM TOSE LANE   City/State/Zip:   US 590 PTIM TOSE LANE   Contractor Phone:   Plumber:   TON RIVEY, WI 54847   Contractor Phone:   Plumber:   TON RIVEY, WI 54847   Contractor Phone:   Plumber:   TON RIVEY   Agent Phone:   Agent Mailing Address (include City/State/Zip:   TON RIVEY   Agent Phone:   TON RIVEY   TON Shoreline					MATERIA KI		/	1000	1				
Mathy Construction Company  Po Box 19 9  Onaldska  Address of Property:  (S590 Primrose Lane  Contractor Phone:  IFON RIVEY, WI 54047  Contractor Phone:  15-40-0065  Authorized Agent: (Person Signing Application on behalf of Owner(s))  Agent Phone:  15-40-0065  Agent Mailing Address (include City)staze)  TIS-40-0065  TIS-40-		REQUESTED→ ☐ LAN	DUSE 🗆 SA	and the Spirit Spirit Spirit Spirit		<u> X</u>	CONDIT	IONAL USE	0.8				
Address of Property:  (\$5590 Primarce Lane   Citry/State/Zip:   IrOn River, W  54847  Contractor:   Wilestone Madertals   Contractor Phone:   Tis-49-0665   Plumber:   Tis-49-0665   Agent Mailing Address (include City/State/Zip:   Agent Mailing Address (include City/State/Zip:   Tis-49-0665   Agent Mailing Address (include City/State/Zip:   Agent Mailing Address (include City/State/Zip:   Tis-49-0665   Agent Mailing Address (include City/State/Zip:   Agent Mailing Address (include City/State/Zip:   Tis-49-0665   Agent Mailing Add		1 1. 0	_	Mail	ing Address:			City/State/7	lip:				
Contractor: Wijestone Madertals Authorized Agent: (Person Signing Application on behalf of Owner(s)) Candy Hyderson Candy Hyde			ompany	P(	D BOX 1	$\mathcal{G}$	9	onald	lska a				
Contractor: Milestone Materials   Contractor Phone:   Tis 40 colors   Agent Mailing Address (include City/State// Tis 40 colors   Agent Mailing Agent Mailin													
Authorized Agent: (Person Signing Application on behalf of Owner(s))  CANDY ANDERSON  PROJECT LOCATION  Legal Description: (Use Tax Statement)  PROJECT LOCATION  Legal Description: (Use Tax Statement)  Agent Phone:  Tax ID#  19 T1 And 19 719  NE 1/4, SW 1/4  SE 1/4 - SW 1/4  SE 1/4 - SW 1/4  Section 26, Township 47 N, Range 8 W Town of:  Treek or Landward side of Floodplain? If yes—continue →  Is Property/Land within 300 feet of Lake, Pond or Flowage If yes—continue →  Is Property/Land within 1000 feet of Lake, Pond or Flowage If yes—continue →  Non-Shoreland  Value at Time of Completion  *include donated time & material  New Construction  Project  # of Stories  Foundation  Sewer/Sanitary Secify Type of Secify Type  Agent Mailing Address (include City/State/7  Tax ID#  19 T1 And 19 719  Lot(s) No. Block(s) No. Bl													
Authorized Agent: (Person Signing Application on behalf of Owner(s))  CANALY ANGLETS  CANALY ANGLETS  Legal Description: (Use Tax Statement)  PROJECT LOCATION  Legal Description: (Use Tax Statement)  Section 26  Tax ID#  Town of: ITON RIVEY  Lot(s) No. Block(s) No. Scales  Town of: ITON RIVEY  Lot(s) No. Scales  Town of: ITON RIVEY  Lot(s) No. Sca	Milestone Materials 715-492-0065												
PROJECT Legal Description: (Use Tax Statement)  PROJECT LOCATION  Legal Description: (Use Tax Statement)    Second Description: (Use Tax Statement)   Tax ID#   Tax ID	Authorized Agent: (	110 1-10 000 3											
Legal Description: (Use Tax Statement)   19   17 and 19   19	Candi												
Section 26 , Township 47 N, Range 8 W Town of: 1700 RIVEY    Section 26 , Township 47 N, Range 8 W Town of: 1700 RIVEY    Is Property/Land within 300 feet of River, Stream (Incl. Intermittent) Creek or Landward side of Floodplain? If yescontinue   If yescontinue   Distance Structure is from Shoreline: feet   If yescontinue   Distance Structure is from Shoreline: feet   If yescontinue   Distance Structure is from Shoreline: feet   Distance Structure is fro		PROJECT Local Descriptions (Use To State of )											
Section 26, Township 47 N, Range 8 W Town of: IVON RIVEY    Is Property/Land within 300 feet of River, Stream (Ind. Intermittent) Creek or Landward side of Floodplain? If yescontinue   Distance Structure is from Shoreline: feet													
Creek or Landward side of Floodplain? If yescontinue													
S Property/Land within 1000 feet of Lake, Pond or Flowage If yescontinue → Distance Structure is from Shoreline: 500'- 000' feet							Distanc	e Structure	is from Shorellr				
Value at Time of Completion * include donated time & material  New Construction   1-Story   Basement   1   Municipal/City   Sement   Semen	□ Snoreland →	☐ Is Property/Land within	n 1000 feet of La	· .			Distanc						
of Completion * include donated time & material  New Construction  Addition/Alteration  Conversion  Relocate (existing bldg)  Run a Business on Property  Project  # of Stories  Foundation  # of bedrooms in structure  Basement  Basement  Foundation  # of bedrooms in structure  # of bedrooms in structure  # of bedrooms in structure    Municipal/City   Municipal/City   October   Sanitary Specify Type:	☐ Non-Shoreland												
Addition/Alteration   1-Story + Loft   Foundation   2   (New) Sanitary Specify Type:	of Completion * include donated time &	Project	# of Storie	es	Foundatio	n	bedroo in	oms	Sewer/	Sanitary Sys			
Conversion		☐ New Construction	☐ 1-Story		☐ Basemen	t	□ 1	D 1	/lunicipal/City				
Conversion   2-Story   3   Sanitary (Exists) Specify Type:   Relocate (existing bldg)   Privy (Pit) or   Vaulted (mir   Run a Business on   Use   None   Portable (w/service contract)   Property   Year Round   Compost Toilet	ا ما	☐ Addition/Alteration	☐ 1-Story +	Loft	☐ Foundati	on	□ 2	□ (	New) Sanitar	Specify Type:			
□ Relocate (existing bldg) □ □ □ □ □ Privy (Pit) or □ Vaulted (mir □ Run a Business on □ Property □ Year Round □ Compost Toilet □ Relocate (existing bldg) □ □ □ □ □ Privy (Pit) or □ Vaulted (mir □ Vau	' NA	☐ Conversion	☐ 2-Story				□ 3						
□ Run a Business on □ Property □ Year Round □ Compost Toilet □ Run a Business on □ Portable (w/service contract) □ Compost Toilet		☐ Relocate (existing bldg)											
Property		☐ Run a Business on			Use		□ Noi						
E Oldive of F		D											
		& gravel pit											

Proposed Use	1	Proposed Structure	ם	imension	5	
		Principal Structure (first structure on property)	(	X	1	
		Residence (i.e. cabin, hunting shack, etc.)	(	X	i i	
		with Loft	(	χ	1	
☐ Residential Use		with a Porch	(	Х	7 1	
		with (2 <sup>nd</sup> ) Porch	(	Х	)	
		with a Deck	(	Х	- 1	
		with (2 <sup>nd</sup> ) Deck	(	Х	)	
Commercial Use		with Attached Garage	(	Х	)	
		<b>Bunkhouse</b> w/ ( $\square$ sanitary, $\underline{or}$ $\square$ sleeping quarters, $\underline{or}$ $\square$ cooking & food prep facilities)	(	Х	)	
		Mobile Home (manufactured date)	1	X.	)	
□ Municipal H		Addition/Alteration (specify)	(	Х	-)	
☐ Municipal Use		Accessory Building (specify)	(	Х	)	
		Accessory Building Addition/Alteration (specify)	(	Х	)	
		Special Use: (explain)	1	Х	)	
	X	Conditional Use: (explain) ATAVE DI-	(	Х	}	
		Other: (explain)	1	Х	)	

Length:

Length:

FAILURE TO OBTAIN A PERMIT or STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PERMIT OF STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PERMIT OF STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PERMIT OF STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PERMIT WILL RESULT IN PERMIT OF STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PERMIT WILL RESULT IN PERMIT OF STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PERMIT WILL RESULT WILL RESU (are) responsible for the detail and accuracy of all info result of Bayfield County relying on this informational property at any reasonable time for the purpose of ins

Owner(s):

Existing Structure: (if permit being applied for is relevant to it)

Proposed Construction:

(If there are Multiple Owners listed on the Deed All Owners must sign or letter(s) of authorization must accompany this application)

Authorized Agent: Club Amade Machine (If you are significant on behalf of the owner(s) a letter of authorization must accompany this application)

Address to send permit % Candy Anderson Monarch Paving
768 US Highway 8
Ameny wk 54001

Copy of Tax Statement

If you recently purchased the property send your Recorded Deed

he bo	ox below: <u>Draw</u> or <u>Sketch</u> you	r Property (regardless of what you are applying for)	Fill Out in Ink – NO PENCIL
A 100 Miles	(1) Show Location of:	Proposed Construction	
(2		North (N) on Plot Plan	
(3		(*) Driveway and (*) Frontage Road (Name Frontage Road)	
(4 (5	•	All Existing Structures on your Property  (*) Well (W); (*) Septic Tank (ST); (*) Drain Field (DF); (*) Holding	Tank (HT) and/or (*) Privy (D)
(6	•	(*) Lake; (*) River; (*) Stream/Creek; or (*) Pond	, rank (iii) and/or ( / riivy (i )
(7		(*) Wetlands; or (*) Slopes over 20%	
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Please complete (1) – (7) above (prior to continuing)

Changes in plans must be approved by the Planning & Zoning Dept.

(8) **Setbacks:** (measured to the closest point)

Description	Measure	ment	Description	Measurement		
Setback from the Centerline of Platted Road		Feet	Setback from the <b>Lake</b> (ordinary high-water mark)	1501-20	6' Feet	
Setback from the Established Right-of-Way	_	Feet	Setback from the River, Stream, Creek	-	Feet	
			Setback from the Bank or Bluff	_	Feet	
Setback from the <b>North</b> Lot Line	50'	Feet				
Setback from the <b>South</b> Lot Line	0	Feet	Setback from <b>Wetland</b>		Feet	
Setback from the West Lot Line	0	Feet	20% Slope Area on the property	☐ Yes	X No	
Setback from the <b>East</b> Lot Line	56'	Feet	Elevation of <b>Floodplain</b>	-	Feet	
Setback to Septic Tank or Holding Tank	_	Feet	Setback to Well		Feet	
Setback to <b>Drain Field</b>	_	Feet				
Setback to <b>Privy</b> (Portable, Composting)	-	Feet				

Prior to the placement or construction of a structure within ten (10) feet of the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner or marked by a licensed surveyor at the owner's expense.

Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be marked by a licensed surveyor at the owner's expense.

#### (9) Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W).

NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun.

For The Construction Of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code.

The local Town, Village, City, State or Federal agencies may also require permits.

You are responsible for complying with state and federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the department of natural resources wetlands identification web page or contact a department of natural resources service center (715) 685-2900.

Issuance Information (County Use Only)	Sanitary Number:		# of bedrooms:	Sanitary Date:						
Permit Denied (Date):	Reason for Denial:									
Permit #: 19-0239	Permit Date: 7-20	7-23-19								
Is Parcel a Sub-Standard Lot Is Parcel in Common Ownership Is Structure Non-Conforming	ous Lot(s)) 🔲 No	Mitigation Required Mitigation Attached	□ Yes □ No □ Yes □ No	Affidavit Required Affidavit Attached ✓ Yes □ No						
Granted by Variance (B.O.A.)  ☐ Yes ☑ No Case #:		Previously Granted by		e#:						
Was Parcel Legally Created Was Proposed Building Site Delineated  ✓ Yes □ No		Were Property Lines Represented by Owner  Was Property Surveyed  ☐ Yes  ☐ Yes								
Inspection Record: No site inspection		Zoning District ( 🏳 ) Lakes Classification ( 3 DL								
Date of Inspection:	Inspected by:		Date of Re-Inspection:							
Condition(s): Town, Committee or Board Conditions Atta	ched? ☐ Yes ☐ No - (If	No they need to be atta	iched.)							
conditions per Planning: Zoning committee / recorded affidavit										
Signature of Inspector:		7 - 17 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -		Date of Approval:						
Hold For Sanitary: 🗆 Hold For TBA: 🗆 _	Hold For Affi	Affidavit: 🗆 Hold For Fees: 🗆 🗆								

### ity, Village, State or Federal May Also Be Required

AND USE - Required SANITARY - Required (if applicable w/land use) sign -SPECIAL -**CONDITIONAL - X (6/20/2019)** BOA -

## **BAYFIELD COUNTY** PERMIT

WEATHERIZE AND POST THIS PERMIT ON THE PREMISES DURING CONSTUCTION

No.

19-0239

Issued To:

Mathy Construction Co / Candy Anderson, Agent

Par in

Location:

**NE** ½ of **SW** ½

Section

26

Township 47

N. Range **8** 

W. Town of

Iron River

Gov't Lot

Lot

Block

Subdivision

CSM#

For: Commercial Other: EIA; Reclamation Plan; and renewal of (2) existing non-metallic mines in F-1 zone

(Disclaimer): The Planning and Zoning Department does not authorize the beginning of any construction or land use; you must first obtain land use application(s)/permit card(s) from the Planning and Zoning Department. You (the property owner) shall fulfill the conditions placed by the Board of Adjustment; your recorded affidavit; sanitary (if applicable) and/or any additional requirements placed by this Department. The Planning and Zoning Department requires verification/proof that all conditions have been met. Any future expansions or development would require additional permitting.

Condition(s):1] Includes crushing, screening, washing and loading, and stock piling. 2] 10-year duration (expires July 23, 2029). 31 A boundary survey or accurate identification of exterior boundaries is required. 41 All Federal, State and Local regulations must be followed.

NOTE:

Conditional Use permit shall automatically terminate 12 months from its date of issuance if the authorized building activity, land alteration or use has not begun within such time. If your Conditional Use is discontinued for 36 consecutive months, the permit authorizing it shall automatically terminate, and any future use of the building(s) or property to which the permit pertained shall conform to Ordinance.

Changes in plans or specifications shall not be made without obtaining approval from Planning and Zoning Committee. This permit may be void or revoked if any of the application information is found to have been misrepresented, erroneous, or incomplete.

This permit may be void or revoked if any performance conditions are not completed or if any prohibitory conditions are violated.

**Tracy Pooler** 

Authorized Issuing Official

July 23, 2019

Date

SUBMIT: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO:

Bayfield County Planning and Zoning Depart. PO Box 58 Washburn, WI 54891

Authorized Agent:

#### **APPLICATION FOR PERMIT** BAYFIELD COUNTY, WISCONSIN

Date Stamp (Received) JUN 28 2019

Bayfield Co. Zoning Dept.

	Permit #:	19-0243
	Date:	7-24-19
MTERED)	Amount Paid:	196 6-28-19
	Refund:	

Checks are made pay	yable to: E	Bayfield C	ounty Zoning I	Department.							/a.a.		<u> </u>	
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TYPE OF PERMIT I		TED—▶	X LANI	USE 🗆 SA	NITAR	Y 🗆 PRIVY 🖺 ng Address:	CONDITIO	The state of the s	☐ SPECIAL	USE	☐ B.O.		OTHER	( <u> </u>
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Kondy	10/0	rge			63	3500 Cpd	(cay ft.	4son	Kive			C 11 51		
Address of Property	:	0	1		City/	State/Zip:	2					Cell Phor	ıe:	
63000	<u>Cz</u>	> L-bc	ey it		14	con Ku	ver					918 c	<u> 393</u>	<u> 22/3</u>
Contractor:	/	3	11.508		Cont	- 1- 1 1 1 1 1 -	Plumber:					Plumber	Phone	:
Authorized Agent: (	Person Sig	ーシン() ning Appli	cation on behalf	of Owner(s))	Agen	21201001	Agent Mailing	Address (incl	ude City/State	/Zin):		Written	Author	zation
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DROUGCE					Tax I		•			Record	led Docur	☐ Yes	No Owing O	wnership)
PROJECT LOCATION	Legal	Descrip	tion: (Use Ta	ax Statement)		19901	\$ 369	724		20	19R	5	775	6
NENIJA, S	<u>5</u> W :	1/4	Gov't Lot	Lot(s)	CSM			ot(s) No.	Block(s) No.	Subdiv	vision:			
VW NE S	$\omega$		1/17			Town of:				Lot Siz	•	Acrea		
Section <u>30</u>	, Tow	nship _	<b>7</b> / N, R	ange <u>O</u> v	W	Iron Ri	ver			LUC 312	e			4 4.6
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	/5-131	Toperty	, Lanu Witini	1 1000 teet of La		rescontinue>	Distance 5	SO4	rom Shorelin	e: feet	□ Y		XYes □ No	
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Value at Time							Total # o	of						Type of
of Completion * include		Proje	ct	# of Stori	oe.	Foundation	bedroom	15		at Type			Water	
donated time &				100000000000000000000000000000000000000		roundation	on			iewer/Sanitary Systoms is on the property				on
material							property	У		•				property
			truction	X 1-Story		Basement			nicipal/City					City
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3 <b>9</b> 000		versio	n xisting bldg)	☐ 2-Story		□ Slab	-3-9MA		itary (Exists					<i>I</i>
			ness on			Use	> None		<b>ry (Pit)</b> or			200 gallo	<u>(n)</u>	
4-		perty				X Year Round	- None		☐ Portable (w/service contr☐ Compost Toilet				-	
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Proposed Us	ie :	1	14.			Proposed Structu	ıre			Dir	mension	s		uare
			Principal	Structure (fire	st struc	ture on property)				7	х	-,	100	otage
				(i.e. cabin, h			*****			<del>`</del>		1	wa.	
				with Loft					***************************************	(	X	<u>,</u>	*****	
<b>Residential</b>	Use			with a Porc	h					(	Х	<u> </u>		
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			Other: (ex	plain)						(	X	)		
1660 4-1	malio-et *	in al. O	FAILURE TO	OBTAIN A PERMIT	or STAF	TING CONSTRUCTION	WITHOUT A PEI	RMIT WILL RES	ULT IN PENALTI	ES				
(are) responsible for the	detail and a	accuracy o	f all information I	(we) am (are) provid	ling and th	ned by me (us) and to the b nat it will be relied upon by	Bayfield County i	in determining wi	nether to issue a n	ermit. I (w	e) further ac	cent liability	, which m	av ha a
result of Bayfield Count property at any reasonal	y relying on	this infor	nation I (we) am	(are) providing in or	with this	application. I (we) consent	to county officials	charged with ad	ministering count	y ordinance	s to have a	cess to the	above de	scribed
Owner(s):	fan.	of an	SII	rall	(	Aur C	dia				/ -	1-10	<i></i>	
(If there are Multi	ple Owne	listed	on the Deed	Willowners must	sign <u>or</u> /	Alune Co otter(s) of authorizat	ion must accor	mpany this ap	plication)	Date	6-	2 / ]		

Copy of Tax Statement If you recently purchased the property send your Recorded Deed

In the box below: Draw or Sketch yo	ur Property (regardless of what you are applying for)	Fill Out in Ink – NO PENCIL
(1) Show Location of:	Proposed Construction	Thi Out in lik - NO TENCIE
(2) Show / Indicate:	North (N) on Plot Plan	
(3) Show Location of (*):	(*) <b>Driveway</b> and (*) <b>Frontage Road</b> (Name Frontage	Road)
(4) Show:	All Existing Structures on your Property	
(5) Show:	(*) Well (W); (*) Septic Tank (ST); (*) Drain Field (DF)	; (*) Holding Tank (HT) and/or (*) Privy (P)
(6) Show any (*):	(*) Lake; (*) River; (*) Stream/Creek; or (*) Pond	Web of most and
(7) Show any (*):	(*) Wetlands; or (*) Slopes over 20%	40 x 50 eavets eave
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\ O well	_	04WM
	1 Drain	Lau J
	Field	1 ona

Please complete (1) – (7) above (prior to continuing)

(8) Setbacks: (measured to the closest point)

Changes in plans must be approved by the Planning & Zoning Dept.

Description	Measurem	ent	Description	Measurement		
Setback from the Centerline of Platted Road	1.000+	Feet	Setback from the <b>Lake</b> (ordinary high-water mark)	80-100	Feet	
Setback from the Established Right-of-Way	1,000 4	Feet	Setback from the River, Stream, Creek	180	Feet	
	7		Setback from the Bank or Bluff	100	Feet	
Setback from the <b>North</b> Lot Line	350	Feet				
Setback from the <b>South</b> Lot Line	256	Feet	Setback from Wetland	80	Feet	
Setback from the <b>West</b> Lot Line	850	Feet	20% Slope Area on the property	A.4	No	
Setback from the <b>East</b> Lot Line	300	Feet	Elevation of Floodplain	NA	Feet	
Setback to <b>Septic Tank</b> or <b>Holding Tank</b>	500	Feet	Setback to <b>Well</b>	506	Feet	
Setback to <b>Drain Field</b>	600	Feet	· ·		•	
Setback to <b>Privy</b> (Portable, Composting)	NA	Feet				

other previously surveyed corner or marked by a licensed surveyor at the owner's expense.

Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be marked by a licensed surveyor at the owner's expense.

#### (9) Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W).

NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun.

For The Construction Of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code.

The local Town, Village, City, State or Federal agencies may also require permits.

You are responsible for complying with state and federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the department of natural resources wetlands identification web page or contact a department of natural resources service center (715) 685-2900.

Issuance Information (County Use Only)	Sanitary Number: 2	59763	# of bedrooms: 2	Sanitary Date: 11 - 8 - 95						
Permit Denied (Date):	Reason for Denial:									
Permit #: 19-0243	Permit Date: 7-24	1-19								
Is Parcel a Sub-Standard Lot Is Parcel in Common Ownership Is Structure Non-Conforming    Yes (Fused/Contiguents)   Yes	ious Lot(s)) . 📮 <b>No</b>	Mitigation Required Mitigation Attached		Affidavit Required						
Granted by Variance (B.O.A.)  ☐ Yes ② No Case #:		Previously Granted b ☐ Yes ☐ No	y Variance (B.O.A.) Case	· #:						
Was Parcel Legally Created  Was Proposed Building Site Delineated  ✓ Yes □ No		Were Property Lin	es Represented by Owner Was Property Surveyed	□Yes □ □ No □ Yes □ ₩ No						
Inspection Record: owner onside and markers to other. Appear.	project site in code comp	1ell-marked	hw/ Setback	Zoning District (F-1) Lakes Classification (J)						
Date of Inspection: 7 - 10 - 19	Inspected by: Toda	d Norwood		Date of Re-Inspection:						
Condition(s): Town, Committee or Board Conditions Atta		Mind Provide Transaction Co. (2) Total State Co. (2)	The state of the s							
May not be used for human habitation. No water under pressure in structure.										
Signature of Inspector: Todd Normal	must meet	? Whinkin Se	t becks	Date of Approval: 7 - 12-19						
Hold For Sanitary:	Hold For Affic									

# City, Village, State or Federal May Also Be Required

or if any prohibitory conditions are violated.

LAND USE - X SANITARY -SIGN -SPECIAL -CONDITIONAL -BOA -

# BAYFIELD COUNTY PERMIT

WEATHERIZE AND POST THIS PERMIT ON THE PREMISES DURING CONSTUCTION

No.		19-0	243			ssue	d To: Ra	andol	ph Morgel 8	& Jun	e And	derson				
NE 1/4 Location		4 SV NE		<b>&amp; N</b> of	W 1/4 SW	1/4	Section	30	Township	47	N.	Range	8	W.	Town of	Iron River
	<b></b>					***************************************		***************************************								
Gov't L	.ot			L	_ot		Blo	ock	Su	bdivisi	on			····	CSM#	Market Control of the
For: <b>R</b> e	esider ıimer):	<b>ntial</b> Anv	Acc	ess ire ex	ory St	t <b>ruct</b> ns or c	u <b>re: [ 1-</b> developmer	Story;	; <b>Pole Build</b> require addition	<b>ing (3</b> nal per	<b>6' x 4</b> mitting	18') = 1,7	88 s	q. ft. j	]	
Vou are resno	onsible for o	n	ain	tain	setba	acks	* r construction near	or on wetlar	nds. lakes. and streams. V	Vetlands tha	t are not as	ssociated with ope	n water	can be diffic	cult to identify. Failure	Must meet and to comply may result in removal or urces service center (715) 685-2900.
														To	odd Norwe	ood
NOTE:							ized Issuing	ed Issuing Official								
	Chang permit	jes in may l	plans be vo	or sp id or r	ecification	ons sha if any d	all not be ma of the applica	ade witho	out obtaining app ormation is found	roval. T to have	his been			_		
	misrep	resen	ted, e	errone	ous, or i	ncomp	olete.							Jı	ıly 24, 201	19
	This p	ermit ı	may b	e voi	d or revo	ked if	any perform	ance coi	nditions are not o	complete	ed	***************************************			Date	